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PTO/SB/27 (09-04)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/064,533
Filing Date	07/24/02
First Named Inventor	Luis Felipe Guglielmucci
Art Unit	3627
Examiner Name	Ronald Laneau
Attorney Docket Number	

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	Amendment of application 10/064,533 in response to office action mailed in 05/28/04.
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.59		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name			
Signature			
Printed name	Luis Felipe Guglielmucci		
Date	11/25/04	Reg. No.	32529

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Typed or printed name Luis Felipe Guglielmucci

Date 11/25/04

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**GROUP 3600**

PTO/SB/14A  
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Effective on 10/01/2004. Patent fees are subject to annual revision.

## FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
**490**

### Complete if Known

Application Number	10/064,533
Filing Date	07/24/02
First Named Inventor	LUIS FELIPE GUGLIELMUCCI
Examiner Name	RONALD LANEAU
Art Unit	3627
Attorney Docket No.	

### METHOD OF PAYMENT (check all that apply)

Check     Credit Card     Money Order

Deposit Account     None

Deposit Account Number  
\_\_\_\_\_  
Deposit Account Name  
\_\_\_\_\_

The Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below
- Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
- Credit any overpayments

to the above-identified deposit account.

Other (please identify): \_\_\_\_\_

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### FEE CALCULATION

#### 1. BASIC FILING FEE

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid(\$)
Utility Filing Fee	790	395	_____
Design Filing Fee	350	175	_____
Plant Filing Fee	550	275	_____
Reissue Filing Fee	790	395	_____
Provisional Filing Fee	160	80	_____
<b>Subtotal (1) \$</b>	<b>490</b>		

### FEE CALCULATION (continued)

#### 2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

**Total Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**  
- 20 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_  
HP = highest number of total claims paid for, if greater than 20

**Indep. Claims**    **Extra Claims**    **Fee (\$)**    **Fee Paid (\$)**  
- 3 or HP = \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_  
HP = highest number of independent claims paid for, if greater than 3

**Multiple Dependent Claims**    **Fee (\$)**    **Fee Paid (\$)**  
\_\_\_\_\_

**Subtotal (2) \$**    **490**

#### 3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid(\$)
1-month extension of time	110	55	_____
2-month extension of time	430	215	_____
3-month extension of time	980	490	<b>490</b>
4-month extension of time	1,530	765	_____
5-month extension of time	2,080	1,040	_____
Information disclosure stmt. fee	180	180	_____
37 CFR 1.17(q) processing fee	50	50	_____
Non-English specification	130	130	_____
Notice of Appeal	340	170	_____
Filing a brief in support of appeal	340	170	_____
Request for oral hearing	300	150	_____
Other: _____			

**Subtotal (3) \$**    **490**

### SUBMITTED BY

Signature	<i>Luis Felipe Guglielmucci</i>	Registration No. (Attorney/Agent)	Telephone <b>56-2-3725413</b>
Name (Print/Type)	<b>Luis Felipe Guglielmucci</b>	Date <b>11/25/04</b>	

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